

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J22140

FILED
Mar 01, 2007
Secretary of State

Entity Name: ROBERTS ENTERPRISES, INC.

Current Principal Place of Business:

1900 NE 25TH AVE
OCALA, FL 34474 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 100
SILVER SPRINGS, FL 34489 US

New Mailing Address:

FEI Number: 59-2721263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKS, DANIEL
421 S. PINE AVE
OCALA, FL 34474 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: ROBERTS, WILLIAM H JR
Address: P.O. BOX 142 N/A
City-St-Zip: SILVER SPRINGS, FL 34489

Title: S () Delete
Name: ROBERTS, NANCY
Address: P.O. BOX 142 N/A
City-St-Zip: SILVER SPRINGS, FL 34489

Title: P () Delete
Name: ROBERTS, BENJAMIN
Address: 4460 SW 20TH AVE
City-St-Zip: OCALA, FL 34474

Title: 1V () Delete
Name: ROBERTS, WILLIAM H III
Address: 4580 S E 36TH AVE
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BENJAMIN W ROBERTS

PRES

03/01/2007

Electronic Signature of Signing Officer or Director

_____ Date